

# Goals & Objectives

## FY 2001-05

### GOAL STATEMENT: 1-TRANSPORTATION

*Increase transportation for seniors and younger adults with disabilities.*

#### **RATIONALE:**

*Transportation services in the remote areas, particularly the high desert and mountain communities are not adequate. Emergency medical and other health care facilities are often located in the urban centers, which are a great distant from these rural areas. Older adults may have to wait for hours in order to be transported to receive medical care, which increases their chance of having a serious medical episode.*

*Transportation services provided within all areas of the County are inconvenient for seniors and younger individuals with disabilities. Apart from the high cost, services such as Dial-A Ride and Dial-A-Cab require individuals to call 24 hours in advance in order to schedule transportation and then wait hours for the cab to arrive. With few exceptions, and only in the most urban areas, transportation services do not provide escort services and/or assistance getting in and out of the vehicles to seniors and younger disabled adults. Many seniors and younger adults with disabilities also require assistance in ambulating and with interacting with medical providers. They may need assistance with interpretation of instructions for medication. In addition, they may need transportation from the physician's office to the pharmacy. Transportation services need to be developed which are responsive to the needs of seniors and younger adults with disabilities.*

#### **OBJECTIVES:**

- 1.1 By **June 30, 2002**, identify at least two geographic areas within the County of San Bernardino that could

benefit from the delivery of transportation service, by the Transportation Reimbursement Escort Program. (TREP) **Staff Responsible-Staff Analyst/Senior Affairs Commission Members-Program Development**

## Goal Statement 2-Health Care

*To provide educational tools and resources that focus endeavors on reducing premature deaths and preserving independence for seniors and disabled adults.*

### **RATIONAL:**

*One of the major concerns of San Bernardino County residents is health care. Throughout the County seniors and younger adults with disabilities agreed that they need access to medical facilities, long-term in-home care, and emergency services. They recognize that improvements need to be made in the provision of medical care to better meet their health care needs. There is a need for more medical facilities and services throughout San Bernardino County, especially in the more rural areas. The access to medical care and services is very limited in many areas of the County and non-existent in others. For example for one individual living in Trona stated that her provider is across the County line in Kern County, for others along the Colorado River health care services must be secured from providers in Arizona in Bullhead City, Parker, etc. Seniors reported having to travel great distances in order to receive the most essential health care.*

*Prescription drug cost is also a concern for many of the seniors living on fixed incomes. Too often seniors are made to choose between food and buying their medicines. Efforts need to be made to sponsor legislation that will enable seniors to have a national and state medications act to mitigate this problem.*

### **OBJECTIVES:**

- 2.1** By **June 2002**, in order to better equip the elderly and disabled adults in our County with the ability to receive improved medical care, the Senior Affairs Commission Health Committee will provide 9 SMART

program outreaches in select community sites where seniors congregate. **Staff responsible will be SAC Health Committee and RCA members. Program Development**

- 2.2** By **December 2002**, in order to obtain a better perspective on the health needs of the elderly and disabled adults the SAC Health Committee in conjunction with the local Regional Councils on Aging will design a health questionnaires and administer it to all In-Home Supportive Services recipients Countywide (approximately 9,000 questionnaires). Additionally, 1000 questionnaires will be distributed at Senior Centers and Congregate Meal sites throughout the County with data analysis beginning FY 2002/2003. **Staff responsible for the data collection and analysis will be SAC Health committee, Program Specialist and RCA members. Program Development**

## **GOAL STATEMENT: 3-HOUSING**

*Maximize the utilization of all existing programs, resources, and services related to (1) the acquisition of affordable housing/shelter, (2) the repair/maintenance of housing, (3) ensuring that homeowner's and renter's legal rights are maintained, and (4) ensuring that homeowners have the option of utilizing equity in their property to meet their self-determined needs/goals.*

### **RATIONALE:**

*Affordable, safe housing is a major concern for society as a whole and particularly for the relatively high percentage of senior and dependent adults who must meet their housing needs within limited/fixed incomes. Additionally, senior and dependent younger adults are (1) frequently unaware or lack sufficient knowledge concerning their legal rights as homeowners/renters, and, (2) are frequently unaware or lack sufficient knowledge concerning the options available to them as homeowners to use property equity to maintain/improve their existing housing.*

### **OBJECTIVES:**

- 3.1** By **June 2002**, determine locations/availability of low cost rental housing through surveying the Information

and Assistance offices to determine service gaps and waiting lists and develop necessary working relationships with landlords/property managers by developing an MOU to work together with appropriate housing organization to develop more affordable housing solutions. **Staff Responsible-Staff Analyst/Senior Affairs Commissioner-Coordination**

## **Goal Statement 4-Aging and Adult Networks**

*Organize, integrate, and empower a single San Bernardino County Aging and Adult Services Network that will maximize existing resources and develop new resources through collaborative and cooperative efforts with public and private organizations aimed at augmenting services to elder and dependent adults.*

### **RATIONALE:**

*A variety of public and private agencies deliver a broad, occasionally confusing, and often inadequate array of direct services to seniors and younger individuals with disabilities. There exists a need to improve communication, planning, coordination, and cooperation among agencies serving seniors and other adults in order to provide comprehensive community and home-based services to seniors and younger adults.*

*There exists a need for a forum to identify gaps and overlaps in services, to clarify perceptions and expectations among agencies and between agencies and the community, to set priorities for inter-agency projects, and to implement collaborative programs, both public and private, to better serve seniors and younger adults with disabilities.*

### **OBJECTIVES:**

- 4.1 By January, 2002,** develop an Aging and Adult Network consisting of the Directors of pertinent County Departments, consumers who are senior and adults with disabilities, community agencies, service providers, advocates, private foundations, corporations and businesses who are willing to work to meet the needs of seniors and dependent adults and convene one meeting of

the Network. **Staff Responsible-Aging and Adult Network Officer and Director-Program Development**

- 4.2 By **June 2002**, conduct one Adult Protective Services/Multi-Disciplinary Team conference with attendance in excess of 300 individuals in the West End of the County of San Bernardino focused on increasing access to all services for seniors and adults with disabilities. **Staff Responsible-Aging and Adult Network Officer, Social Services Practitioner-Program Development**

## **Goal Statement: 5-Elder and Dependent Adult Abuse Reporting**

*Expand and enhance Adult Protective Services.*

### **RATIONALE:**

*Yearly, the number of elderly abused in San Bernardino County has increased. Last year 3,956 cases were reported, which are a fraction of the actual abuse which occurred but went unreported. Full case loads for APS workers and a lack of time to provide community education has resulted in under reporting. With the newly formed Department of Aging and Adult Services, Information and Assistance staff will work with APS workers in providing community education. This will free the APS workers to investigate the actual cases.*

### **OBJECTIVES:**

- 5.1 By **June 2002**, in order to more readily identify abuse of elderly and dependent adults the Department of Aging and Adult Services in conjunction with violence shelters will explore avenues for offering services to the older population and enter into agreements for shelter use throughout the County of San Bernardino. **Staff responsible-APS Program Specialist, Senior Affairs Commission Chair for the Senior Adult Abuse Prevention Committee- Program Development**

## **GOAL STATEMENT: 6-TARGETING**

*Remove barriers that hinder the full participation of low-income minority elderly in the services provided by the Department of Aging and Adult Services by targeting organizations that provide cultural, religious, and/or recreational activities.*

## **RATIONALE:**

Minority elderly, particularly the Asian elderly, do not participate in most of the services provided by the Department of Aging and Adult Services. This was evident after a review of Management Information System data, and was reinforced by the findings of the Needs Assessment. Most of the problem can be attributed to a wide range of different languages and social customs, which have hindered public education to minorities.

## **OBJECTIVES:**

- 6.1 By June 30, 2002, translate the Needs Assessment Instrument into Cambodian, Korean, Japanese, Vietnamese, and Chinese and conduct a targeted Needs Assessment within these communities the finding to be published in the following Fiscal Year along with recommendations for action. **Planner-Program Development**

## **Goal Statement: 7-Food and Nutrition**

Provide adequate nutrition services to Senior Citizens and Adults with Disabilities.

## **RATIONALE:**

Minority elderly, particularly the Asian elderly, do not participate in most of the services provided by the Department of Aging and Adult Services. This was evident after a review of Management Information System data, and was reinforced by the findings of the Needs Assessment. Most of the problem can be attributed to a wide range of different languages and social customs, which have hindered public education to minorities. In order to expand the nutrition program into these communities it will be necessary to locate and form a partnership with a provider for services to these communities. A pilot project demonstrating this type of service will need to be developed in the metropolitan San Bernardino area.

## **OBJECTIVES:**

- 7.1 By January 2002, locate one organization and determine funding options for this type of service and prepare a memorandum to the Director with a suggested action plan.

**Program Specialist and Nutrition Committee chair.  
Program Development**

- 7.2** By June 30, 2002 determine the best method to use in securing additional funding for the nutrition program and train the providers in securing those funds.  
**Program Specialist and Nutrition Chair-Program Development**

## **GOAL STATEMENT: 8-COMMUNITY-BASED SERVICES PROGRAMS**

*Fully integrate the state funded Community Based Services Programs and operationalize the programs Countywide.*

### **RATIONALE:**

*With the passage of Assembly Bill 2800, the California Department of Aging relinquished direct monitoring and control of the following programs consisting of Alzheimer's Day Care Resource Centers, Senior Companion, Linkages, Health Insurance Counseling and Advocacy Program, Brown Bag, and the Foster Grandparent program. The Foster Grandparent program will be merged into the Senior Companion program allowing the Department of Aging and Adult Services to open an additional site in the Morongo Basin. The Department of Aging and Adult Services has adopted the follow objectives for these programs for the first year of this plan.*

### **OBJECTIVES:**

- 8.1 By June 2002,** Inland Agency (HICAP) will serve approximately 1000 Medicare-eligible seniors and adults with disabilities residing in San Bernardino County, enabling them to make informed decisions about their health care coverage. Staff Responsible-Program Development Unit, Contract Monitor
- 8.2 By June 30, 2002,** Aging Solutions with Heart (DASH) (ADCRC) will serve 45 seniors and their families with 11.5 hours of day care services for six days per week. Staff Responsible-Program Development Unit, Contract Monitor
- 8.3 By June 30, 2002,** Community Hospital (ADCRC) will serve 45 seniors and their families annually, providing 11.5

hours of day care services for six days a week. Staff Responsible-Program Development Unit, Contract Monitor

**8.4 By June 30, 2002,** expand the Senior Companion Program into the Morongo Basin and serve 15 clients with 7,308 hours of companion services. Staff Responsible-Program Development Unit, Contract Monitor

**8.5 By October 2001,** have the **MSSP** program fully staffed and serving 115 clients in the Victorville area and surrounding communities. Staff Responsible-Program Development Unit, Contract Monitor

**8.6 By June 30, 2001,** provide one **Brown Bag Program** in the West end and supply 258 bags of groceries to 150 elderly participants-Program Specialist, Contract Monitor

**8.7 By June 30, 2001,** provide Linkages Countywide to 100 clients. Program Development Unit, Contract Monitor

## **Goal Statement 9-Intergenerational Activities**

*To assist those in the middle years in moving dynamically into their senior years, and to realize that these can be the most challenging and rewarding years of their lives.*

### **RATIONALE:**

*Transformations in society with individuals working longer, taking on the rearing of grandchildren is changing the landscape of aging services. This situation is exacerbated by the fact that those in their middle years are increasingly fearful of everything concerning "aging" and anything which might remind them that they are rapidly becoming a part of the senior population.*

*People who work in the aging network tend to center their attention primarily on the current "senior" population with which they are working. However, because of the normal aging process, the current crop of volunteers who are working with the professionals are gradually aging and losing their ability to carry on with the constantly growing need for their assistance regardless of their desire to do so.*

*The result is that the senior clubs, such as AARP and the others, are seeing their membership dwindle, especially*

among those who are willing to take on a leadership role. It also shows up as a reluctance for the younger seniors to offer their energy and their talents to share the responsibility of helping the professionals who work in the field of aging at the same time that the need for their help is rapidly increasing.

It is evident that we need to concentrate more of our efforts on those in their middle years, to make an effort to erase the fear of aging and the negative stereotyping which has caused this problem, and to make these young "seniors" aware of the fact that the years beyond the halfway point in life can indeed become the most challenging and rewarding years of their lives and to teach them how they can make certain that this will be the case in their future.

## **OBJECTIVES:**

- 9.1 By **October of 2002**, in conjunction and collaboration with a local university present a day long conference to address the importance of all generations joining hands in working together on the challenges and needs shared by all. Conference theme and topics to be presented have yet to be decided, but they would include the importance of volunteerism by all ages, from the youngest to the most elderly, regardless of school or work or how little spare time they think they have. We hope to have the cooperation and input of agencies that work with all age groups, such as schools, libraries and other community-based organizations that depend heavily on volunteers in order to serve the public. **Staff Analyst, Senior Affairs Commission Intergenerational Chair-Program Development**

## **Goal Statement 10-Access**

*To increase awareness, education and advocacy to improve all aspects of accessibility to services within the County of San Bernardino.*

## **RATIONALE:**

People with all kinds of disabilities-motor or sensory, cognitive, emotional, or physical, visible or invisible, acquired early in childhood or late in life-face similar experiences in accessing services. Barriers that hinder access to programs must be identified and to the maximum

extent possible mitigated to allow greater access and usage of these needed programs. The Americans with Disabilities Act (ADA) clearly states that local government must make their programs and services accessible to persons with disabilities. This requirement extends not only to physical access at government facilities, programs, and events— but also to policy changes that government entities must ensure that all people with disabilities can take part in, and benefit from, the programs and services of State and local governments. One of the ways that government can comply with this requirement is through self-evaluation of each facility housing services to older adults and younger disabled adults. This type of self-evaluation enables local government to pinpoint facilities programs and services that must be modified or relocated to ensure that local governments are complying with the ADA.

## **OBJECTIVES:**

- 10.1 By June 2002**, in order to identify accessibility barriers which limit access to services by the elderly and disabled adults the Department of Aging and Adult Services in cooperation with the Senior Affairs Commission Access Committee will distribute Access Barrier Forms to 50 social services organizations, health care providers and senior centers throughout the County. **Staff Analyst, Senior Information and Assistance, Area Representatives, Senior Affairs Commission-Coordination**
- 10.2 By October 2002** analyze data from the Access Barrier Identification forms and prepare a policy report to be submitted to the Director with appropriate actions identified. **Staff Analyst, Supervising Program Specialist-Coordination**

## **Goal Statement 11-Ombudsman Services**

To increase awareness, provide education and advocate on behalf of the residents of long-term care facilities to improve all aspects of their lives assisting them to lead lives of dignity and quality.

## **RATIONALE:**

The Ombudsman Program provides trained volunteers who monitor and address concerns of the patients and their

families in the Long-Term Care Skilled Nursing Facilities. In this capacity, the Ombudsman provides education to the community at large about the options available to the individuals and recruits and trains the volunteers in all aspects of the mitigation, investigation, and resolution of resident problems. The Ombudsman program fully supports the transition of individuals from facilities to home and recognizes the need Caregiver Support and Respite for those individuals who provide assistance to the individuals who have been transitioned. The Ombudsman Program also recognizes the need for fully trained and committed staff at the facilities and supports all endeavors geared towards that end.

## **OBJECTIVES:**

11.1 By **June 2002** in order to increase public awareness of the Ombudsman Program the DAAS program Coordinator will provide 12 community awareness presentations to various community organizations throughout the County of San Bernardino. **Program Coordinator, Field Coordinator-Program Development**

## **Goal Statement 12-Legislative Advocacy**

To increase awareness, and advocacy for Legislation supported by the California Senior Legislature and to gather recommendations from the aging arena in support of that directive.

## **RATIONALE:**

Legislative advocacy serves as a backbone for services and programs. It serves as a conduit to the legislative offices keeping them abreast of the problems being faced by the elderly and adults with disabilities. Such problems as escalating costs for electrical, gas and prescription medicine forcing the older individual to make a choice of staying warm, taking medicine or eating needs legislative redress. It is these issues and more that are within the preview of Legislative advocacy.

## **OBJECTIVES:**

- 12.1** By **June 30, 2002** in order to foster a proactive stance on pending and proposed legislation the Department of Aging and Adult Services will have in place a procedure by which Seniors and Adults with Disabilities throughout the County of San Bernardino can be made aware of pending legislation that may affect them and have the conduit for comments made available. **Program Specialist, SAC Chair of the Legislative Committee**
- 12.2** By **September 2001**, complete a letter writing campaign designed to notify the local Board of Supervisors, members of the State Legislature and members of the House of Congress due to the increased rates of utility bills and the adverse affects that these bills are having on the elderly and adults with disabilities particularly those on fixed incomes. **Network Officer**